

FLO Representative:

## **FAMILY LIAISON OFFICE**

## **FLO Privacy and Publicity Release Agreement**

I authorize the Department of State to videotape me, photograph me, and record my voice <u>as part of</u> the activities associated with recognizing and celebrating FLO's 40<sup>th</sup> Anniversary.

I authorize the Department to post videos, photos, and voice recordings of me for <u>FLO's 40<sup>th</sup></u> <u>Anniversary</u> on Department websites, in Department publications, and in other media. I understand that these videos, photos, and voice recordings may include my name, image, voice, likeness, and other information that I share <u>as part of celebrating FLO's 40<sup>th</sup> Anniversary</u>. I consent to the disclosure of this information to anyone who uses, views, or listens to media that includes a reproduction of the Program.

I voluntarily agree to participate in the above manner without compensation of any kind including, but not limited to, royalties. I grant and release to the U.S. Government the right to use my image, likeness, and voice made in connection <u>with celebrating FLO's 40<sup>th</sup> Anniversary</u> in any manner, to record, reproduce, amplify, simulate, or filter my voice (or the voice of the minor listed below) for informational purposes; and to use the same perpetually in any and all media, whether now known or hereafter devised.

This voluntary grant and release will not be made the basis of a future claim of any kind against the Government. In particular, I waive all rights to claim that any use of my name or likeness by the U.S. Government consistent herewith violates any rights of privacy or publicity I might otherwise have had, pursuant to statute or at common law.

This grant, release, and discharge shall be in effect to the benefit of the U.S. Government, and its officers, agents, servants and employees when acting in their official capacities or otherwise using the Program or any portion thereof. I hereby irrevocably waive the right to inspect or approve any finished video wherein my voice or image appears.

I understand that this form shall be governed and construed according to the federal laws of the United States of America.

Participant	
Name:	Name:
Signature:	Signature:
Date:	Date: